Effective December 29,1999 09 5 18 75 3														
CLAIMS AS FILED - PART I SMALL ENTITY OTHER THAN (Column 1) (Column 2) TYPE OR SMALL ENTITY														
FOR			NUMBE	R FILED		NUMBER EXTRA			RATE FEE		1	RATE	FEE	
BA	SIC FEE		794°C	K 4	·;··	•				3	45.00	OR		690.00
TOTAL CLAIMS			33	minus	XO=	13			X3 9=		OR	X\$18=	234	
IND	EPENDENT CL	AIMS	= 3 minus 3 =			. 3			X39=		OR	X78=	234	
MULTIPLE DEPENDENT CLAIM PRESENT									+130=	1		OR	+260=	
• If	If the difference in column 1 is less than zero, enter "0" in column 2									+		OR	TOTAL	1158
3-3 (Column 1) (Column 2) (Column 3)									TOTAL	•	TITY	OTHER THAN SMALL ENTITY		
NTA		CL REM A	AIMS AIMS FIER NOMENT		P\$	RIGHEST NULBER REVIOUSLY PAID FOB	PRESENT EXTRA		RATE	TI	IDDI- ONAL FEE	OR	RATE	ADDI- TIONAL FEE
AMENDMENT	Total	• "	31	Minus	:	33	- Ø)		X\$ 9=	T		OR	X\$18=	
AMEI	Independent	•	6	Minus	***	V	- 0		X39=	T		OR	X78=	
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+130=	T		OR	+260=	
9-29-03								į	YOTA ADDIT, FE			OR	TOTAL ADDIT, FEE	
	LIU	100	<u>lumn 1)</u>		_((Column 2)	(Column 3)							
AMENDMENT B	h	REA	Laims Baining Fter Noment	·		HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	T	VDDI- IONAL FEE		RATE	ADDI- TIONAL FEE
Ş	Total	•	<u> 31 </u>	Minus	ت	33		H	X\$ 9=			OR	X\$18=	
AME	Independent FIRST PRESE	•	<u></u>	Minus		12			X39=].	••••	ÓR	X78=	
-	PINST PHESE	NIAII	ON OP IN	ULTIPLEUE	PEN	DENT COMM		J	+130=	T		OR	+260=	
9-27-14									TOYA ADDIT, FE			OR	ADDIT. FEE	
_			lumn 1) Alms		T (Column 2) HIGHEST	(Column 3)	١,			001	1		LACCI
INT C		A	SAINING FTER NOMENT		P	NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	T	ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE
2	Total		2	Minus		33]	X\$ 9=	Т		OR	X\$18=.	
AMENDMENT	Independent	·	7	Minus	<u> </u>		• /		X39=	T		OR	7,70,00	210.00
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							J	. 400	+		1	+260=	
• If the entry in column 1 is less than the entry in column 2, write V in column 3.											200,00			
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE Will the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.														

FORM PTO-475 (Rev. 12/99) Application or Docket Number

									Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003 Page 2 09 5 8 753											53			
		CLAIMS AS	FILED -	S	MALL E	NTITY		OTHER	THAN					
(Column 1) (Column 2)								YPE [OR	SMALL	ENTITY		
TC	TAL CLAIMS							RATE	FEE]	RATE	FEE		
FO	R		NUMBER	FILED	NUMBER EXTRA			BASIC FE	385. 0 0	OR	BASIC FEE	770.00		
то	TAL CHARGEA	BLE CLAIMS	33 mir	าบร 20=	•			XS 9=		OR	X\$18=			
IND	EPENDENT CL	AIMS	-6 · mi	nus 3 =	•			X43=		OR	X86=			
MU	LTIPLE DEPEN	IDENT CLAIM PF	RESENT				ľ	+145=		OR	+290=			
* If the difference in column 1 is less than zero, enter "0" in column 2							L	TOTAL	-	OR				
•									<u> </u>	100	(TUAN		
(Column 1) (Column 2) (Column 3)								SMALL	ENTITY	OR	OTHER SMALL!			
NTA		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
AMENDMENT	Total	. 19	Minus	- 3	3	- 20 /		X\$ 9=		OR	X\$18=	·		
ME	Independent	. 5	Minus	•••	2	= 0		X43=		OR	· X86=			
	FIRST PRESE	NTATION OF MI	JLTIPLE DEF	PENDENT	CLAIM			+145=		OR	+290=			
<u>-</u>									<u> </u>	OR	TOTAL			
(Column 1) (Column 2) (Column 3)								DOIT. FEE	<u> </u>	,	ADOIT, FEE			
	å	CLAIMS		HIGH	HEST		F		ADDI-	1 1		ADDI-		
ENT B	•	REMAINING AFTER AMENDMENT		PREVIO PAID	DUSLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE		
MON	Total	•	Minus	**		E		X\$ 9=		OR	X\$18=			
AMENDMENT	Ind pendent	*	Minus	***		=		X43=		OR	X86=			
لـــا	FIRST PRESE	NTATION OF MU	ILI IPLE DEF	ENDENT	CLAIM			+145=		OR	+290=			
							L	TOTAL			TOTAL			
								ADDIL FEE						
		(Column 1) CLAIMS		(Colur HIGH		(Column 3)	_	•	ADDI	1 1		400		
AMENDMENT C	,	REMAINING AFTER AMENDMENT	-	NUM PREVIO PAID	DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
4DM	Total	•	Minus	**		e		X\$ 9=		OR	X\$18=			
ME	Independent	•	Minus	***		E		X43= ·	•	OR	X86=			
_	FIRST PRESE	NTATION OF MI	JLTIPLE DE	PENDEM	CLAIM	ــــــــــــــــــــــــــــــــــــــ	-	+145=		UH				
• 1	* If the intry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+290=	<u> </u>		
••	If the "Highest Nu	mber Previously Pa	ud For IN THO	S SPACE	s less tha	in 20, enter "20."	AE	TOTAL DOIT, FEE		OR	TOTAL ADDIT. FEE			
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.														